SEMINOLE COUNTY GOVERNMENT AGENDA MEMORANDUM

SUBJECT: FY 2009/2010 Contract Between the State of Florida Department of Health and Seminole County

DEPARTMENT: Community Services

DIVISION: Administration - Community

<u>Services</u>

AUTHORIZED BY: Michele Saunders CONTACT: Pamela Martin EXT: 2302

MOTION/RECOMMENDATION:

Approve and authorize the Chairman to execute the attached Contract between Seminole County and State of Florida Department of Health for Operation of the Seminole County Health Department Contract Year 2009-2010 in the amount of \$807,970.00.

County-wide Michele Saunders

BACKGROUND:

Pursuant to Chapter 154, Florida Statutes, the intent of the legislature is to "promote, protect, maintain, and improve the health and safety of all citizens and visitors of this state through a system of coordinated county health department services."

County Health Departments were created throughout Florida to satisfy this legislative intent through "promotion of the public's health, the control and eradication of preventable diseases, and the provision of primary health care for special populations."

The Seminole County Health Department is one of the County Health Departments created throughout Florida. It is necessary for the parties to enter into this Contract in order to ensure coordination between the State and the County in the operation of the County Health Department.

Each year, Seminole County enters into a contract with the State of Florida Department of Health which specifies the funding and health services to be delivered to the residents of Seminole County. The appropriation by Seminole County for FY 2009/2010 is an amount not to exceed \$807,970.

STAFF RECOMMENDATION:

Staff recommends to approve and authorize the Chairman to execute the attached contract between the State of Florida Department of Health and Seminole County FY 2009/2010 in the amount of \$807,970.00.

ATTACHMENTS:

1. Agreement

Additionally Reviewed By:

County Attorney Review (Susan Dietrich)

CONTRACT BETWEEN SEMINOLE COUNTY

AND

STATE OF FLORIDA DEPARTMENT OF HEALTH FOR OPERATION OF THE SEMINOLE COUNTY HEALTH DEPARTMENT CONTRACT YEAR 2009-2010

This agreement ("Agreement") is made and entered into between the State of Florida, Department of Health ("State") and the Seminole County ("County"), through their undersigned authorities, effective October 1, 2009.

RECITALS

- A. Pursuant to Chapter 154, F.S., the intent of the legislature is to "promote, protect, maintain, and improve the health and safety of all citizens and visitors of this state through a system of coordinated county health department services."
- B. County Health Departments were created throughout Florida to satisfy this legislative intent through "promotion of the public's health, the control and eradication of preventable diseases, and the provision of primary health care for special populations."
- C. Seminole County Health Department ("CHD") is one of the County Health Departments created throughout Florida. It is necessary for the parties hereto to enter into this Agreement in order to assure coordination between the State and the County in the operation of the CHD.

NOW THEREFORE, in consideration of the mutual promises set forth herein, the sufficiency of which are hereby acknowledged, the parties hereto agree as follows:

- 1. <u>RECITALS</u>. The parties mutually agree that the forgoing recitals are true and correct and incorporated herein by reference.
- 2. <u>TERM</u>. The parties mutually agree that this Agreement shall be effective from October 1, 2009, through September 30, 2010, or until a written agreement replacing this Agreement is entered into between the parties, whichever is later, unless this Agreement is otherwise terminated pursuant to the termination provisions set forth in paragraph 8, below
- 3. <u>SERVICES MAINTAINED BY THE CHD</u>. The parties mutually agree that the CHD shall provide those services as set forth on Part III of Attachment II hereof, in order to maintain the following three levels of service pursuant to Section 154.01(2), Florida Statutes, as defined below:
- a. "Environmental health services" are those services which are organized and operated to protect the health of the general public by monitoring and regulating activities in the environment which may contribute to the occurrence or transmission of disease. Environmental health services shall be supported by available federal, state and local

funds and shall include those services mandated on a state or federal level. Examples of environmental health services include, but are not limited to, food hygiene, safe drinking water supply, sewage and solid waste disposal, swimming pools, group care facilities, migrant labor camps, toxic material control, radiological health, and occupational health.

- b. "Communicable disease control services" are those services which protect the health of the general public through the detection, control, and eradication of diseases which are transmitted primarily by human beings. Communicable disease services shall be supported by available federal, state, and local funds and shall include those services mandated on a state or federal level. Such services include, but are not limited to, epidemiology, sexually transmissible disease detection and control, HIV/AIDS, immunization, tuberculosis control and maintenance of vital statistics.
- c. "Primary care services" are acute care and preventive services that are made available to well and sick persons who are unable to obtain such services due to lack of income or other barriers beyond their control. These services are provided to benefit individuals, improve the collective health of the public, and prevent and control the spread of disease. Primary health care services are provided at home, in group settings, or in clinics. These services shall be supported by available federal, state, and local funds and shall include services mandated on a state or federal level. Examples of primary health care services include, but are not limited to: first contact acute care services; chronic disease detection and treatment; maternal and child health services; family planning; nutrition; school health; supplemental food assistance for women, infants, and children; home health; and dental services.
- 4. <u>FUNDING</u>. The parties further agree that funding for the CHD will be handled as follows:
- a. The funding to be provided by the parties and any other sources are set forth in Part II of Attachment II hereof. This funding will be used as shown in Part I of Attachment II.
 - i. The State's appropriated responsibility (direct contribution excluding any state fees, Medicaid contributions or any other funds not listed on the Schedule C) as provided in Attachment II, Part II is an amount not to exceed \$ 7,563,754 (State General Revenue, Other State Funds and Federal Funds listed on the Schedule C). The State's obligation to pay under this contract is contingent upon an annual appropriation by the Legislature.
 - ii. The County's appropriated responsibility (direct contribution excluding any fees, other cash or local contributions) as provided in Attachment II, Part II is an amount not to exceed \$ 807,970 (amount listed under the "Board of County Commissioners Annual Appropriations section of the revenue attachment).
- b. Overall expenditures will not exceed available funding or budget authority, whichever is less, (either current year or from surplus trust funds) in any service category. Unless requested otherwise, any surplus at the end of the term of this Agreement in the County Health Department Trust Fund that is attributed to the CHD shall be carried forward to the next contract period.

- c. Either party may establish service fees as allowed by law to fund activities of the CHD. Where applicable, such fees shall be automatically adjusted to at least the Medicaid fee schedule.
- d. Either party may increase or decrease funding of this Agreement during the term hereof by notifying the other party in writing of the amount and purpose for the change in funding. If the State initiates the increase/decrease, the CHD will revise the Attachment II and send a copy of the revised pages to the County and the Department of Health, Bureau of Budget Management. If the County initiates the increase/decrease, the County shall notify the CHD. The CHD will then revise the Attachment II and send a copy of the revised pages to the Department of Health, Bureau of Budget Management.
 - e. The name and address of the official payee to who payments shall be made is:

County Health Department Trust Fund Seminole County Health Department 400 West Airport Boulevard Sanford, FL 32765

- 5. <u>CHD DIRECTOR/ADMINISTRATOR</u>. Both parties agree the director/administrator of the CHD shall be a State employee or under contract with the State and will be under the day-to-day direction of the Deputy State Health Officer. The director/administrator shall be selected by the State with the concurrence of the County. The director/administrator of the CHD shall insure that non-categorical sources of funding are used to fulfill public health priorities in the community and the Long Range Program Plan. A report detailing the status of public health as measured by outcome measures and similar indicators will be sent by the CHD director/administrator to the parties no later than October 1 of each year (This is the standard quality assurance "County Health Profile" report located on the Office of Planning, Evaluation & Data Analysis Intranet site).
- 6. <u>ADMINISTRATIVE POLICIES AND PROCEDURES</u>. The parties hereto agree that the following standards should apply in the operation of the CHD:
- a. The CHD and its personnel shall follow all State policies and procedures, except to the extent permitted for the use of county purchasing procedures as set forth in subparagraph b., below. All CHD employees shall be State or State-contract personnel subject to State personnel rules and procedures. Employees will report time in the Health Management System compatible format by program component as specified by the State.
- b. The CHD shall comply with all applicable provisions of federal and state laws and regulations relating to its operation with the exception that the use of county purchasing procedures shall be allowed when it will result in a better price or service and no statewide Department of Health purchasing contract has been implemented for those goods or services. In such cases, the CHD director/administrator must sign a justification therefore, and all county-purchasing procedures must be followed in their entirety, and such compliance shall be documented. Such justification and compliance documentation shall

be maintained by the CHD in accordance with the terms of this Agreement. State procedures must be followed for all leases on facilities not enumerated in Attachment IV.

- c. The CHD shall maintain books, records and documents in accordance with those promulgated by the Generally Accepted Accounting Principles (GAAP) and Governmental Accounting Standards Board (GASB), and the requirements of federal or state law. These records shall be maintained as required by the Department of Health Policies and Procedures for Records Management and shall be open for inspection at any time by the parties and the public, except for those records that are not otherwise subject to disclosure as provided by law which are subject to the confidentiality provisions of paragraph 6.i., below. Books, records and documents must be adequate to allow the CHD to comply with the following reporting requirements:
 - *i.* The revenue and expenditure requirements in the Florida Accounting System Information Resource (FLAIR).
 - ii. The client registration and services reporting requirements of the minimum data set as specified in the most current version of the Client Information System/Health Management Component Pamphlet;
 - iii. Financial procedures specified in the Department of Health's Accounting Procedures Manuals, Accounting memoranda, and Comptroller's memoranda:
 - iv. The CHD is responsible for assuring that all contracts with service providers include provisions that all subcontracted services be reported to the CHD in a manner consistent with the client registration and service reporting requirements of the minimum data set as specified in the Client Information System/Health Management Component Pamphlet.
- d. All funds for the CHD shall be deposited in the County Health Department Trust Fund maintained by the state treasurer. These funds shall be accounted for separately from funds deposited for other CHDs and shall be used only for public health purposes in Seminole County.
- e. That any surplus/deficit funds, including fees or accrued interest, remaining in the County Health Department Trust Fund account at the end of the contract year shall be credited/debited to the State or County, as appropriate, based on the funds contributed by each and the expenditures incurred by each. Expenditures will be charged to the program accounts by State and County based on the ratio of planned expenditures in the core contract and funding from all sources is credited to the program accounts by State and County. The equity share of any surplus/deficit funds accruing to the State and County is determined each month and at contract year-end. Surplus funds may be applied toward the funding requirements of each participating governmental entity in the following year. However, in each such case, all surplus funds, including fees and accrued interest, shall remain in the trust fund until accounted for in a manner which clearly illustrates the amount which has been credited to each participating governmental entity. The planned use of

surplus funds shall be reflected in Attachment II, Part I of this contract, with special capital projects explained in Attachment V.

- f. There shall be no transfer of funds between the three levels of services without a contract amendment unless the CHD director/administrator determines that an emergency exists wherein a time delay would endanger the public's health and the Deputy State Health Officer has approved the transfer. The Deputy State Health Officer shall forward written evidence of this approval to the CHD within 30 days after an emergency transfer.
- g. The CHD may execute subcontracts for services necessary to enable the CHD to carry out the programs specified in this Agreement. Any such subcontract shall include all aforementioned audit and record keeping requirements.
- h. At the request of either party, an audit may be conducted by an independent CPA on the financial records of the CHD and the results made available to the parties within 180 days after the close of the CHD fiscal year. This audit will follow requirements contained in OMB Circular A-133 and may be in conjunction with audits performed by County government. If audit exceptions are found, then the director/administrator of the CHD will prepare a corrective action plan and a copy of that plan and monthly status reports will be furnished to the contract managers for the parties.
- i. The CHD shall not use or disclose any information concerning a recipient of services except as allowed by federal or state law or policy.
- j. The CHD shall retain all client records, financial records, supporting documents, statistical records, and any other documents (including electronic storage media) pertinent to this Agreement for a period of five (5) years after termination of this Agreement. If an audit has been initiated and audit findings have not been resolved at the end of five (5) years, the records shall be retained until resolution of the audit findings.
- k. The CHD shall maintain confidentiality of all data, files, and records that are confidential under the law or are otherwise exempted from disclosure as a public record under Florida law. The CHD shall implement procedures to ensure the protection and confidentiality of all such records and shall comply with sections 384.29, 381.004, 392.65 and 456.057, Florida Statutes, and all other state and federal laws regarding confidentiality. All confidentiality procedures implemented by the CHD shall be consistent with the Department of Health Information Security Policies, Protocols, and Procedures, dated April 2005, as amended, the terms of which are incorporated herein by reference. The CHD shall further adhere to any amendments to the State's security requirements and shall comply with any applicable professional standards of practice with respect to client confidentiality.
- I. The CHD shall abide by all State policies and procedures, which by this reference are incorporated herein as standards to be followed by the CHD, except as otherwise permitted for some purchases using County procedures pursuant to paragraph 6.b. hereof.

- m. The CHD shall establish a system through which applicants for services and current clients may present grievances over denial, modification or termination of services. The CHD will advise applicants of the right to appeal a denial or exclusion from services, of failure to take account of a client's choice of service, and of his/her right to a fair hearing to the final governing authority of the agency. Specific references to existing laws, rules or program manuals are included in Attachment I of this Agreement.
- n. The CHD shall comply with the provisions contained in the Civil Rights Certificate, hereby incorporated into this contract as Attachment III.
- o. The CHD shall submit quarterly reports to the County that shall include at least the following:
 - *i.* The DE385L1 Contract Management Variance Report and the DE580L1 Analysis of Fund Equities Report;
 - ii. A written explanation to the County of service variances reflected in the DE385L1 report if the variance exceeds or falls below 25 percent of the planned expenditure amount. However, if the amount of the service specific variance between actual and planned expenditures does not exceed three percent of the total planned expenditures for the level of service in which the type of service is included, a variance explanation is not required. A copy of the written explanation shall be sent to the Department of Health, Bureau of Budget Management.

- p. The dates for the submission of quarterly reports to the County shall be as follows unless the generation and distribution of reports is delayed due to circumstances beyond the CHD's control:
 - i. March 1, 2010 for the report period October 1, 2009 through December 31, 2009;
 - *ii.* June 1, 2010 for the report period October 1, 2009 through March 31, 2010;
 - iii. September 1, 2010 for the report period October 1, 2009 through June 30, 2010; and
 - iv. December 1, 2010 for the report period October 1, 2009 through September 30, 2010.

7. FACILITIES AND EQUIPMENT. The parties mutually agree that:

- a. CHD facilities shall be provided as specified in Attachment IV to this contract and the County shall own the facilities used by the CHD unless otherwise provided in Attachment IV.
- b. The County shall assure adequate fire and casualty insurance coverage for County-owned CHD offices and buildings and for all furnishings and equipment in CHD offices through either a self-insurance program or insurance purchased by the County.
- c. All vehicles will be transferred to the ownership of the County and registered as County vehicles. The County shall assure insurance coverage for these vehicles is available through either a self-insurance program or insurance purchased by the County. All vehicles will be used solely for CHD operations. Vehicles purchased through the County Health Department Trust Fund shall be sold at fair market value when they are no longer needed by the CHD and the proceeds returned to the County Health Department Trust Fund.

8. TERMINATION.

- a. <u>Termination at Will</u>. This Agreement may be terminated by either party without cause upon no less than one-hundred eighty (180) calendar days notice in writing to the other party unless a lesser time is mutually agreed upon in writing by both parties. Said notice shall be delivered by certified mail, return receipt requested, or in person to the other party's contract manager with proof of delivery.
- b. <u>Termination Because of Lack of Funds</u>. In the event funds to finance this Agreement become unavailable, either party may terminate this Agreement upon no less than twenty-four (24) hours notice. Said notice shall be delivered by certified mail, return receipt requested, or in person to the other party's contract manager with proof of delivery.
- c. <u>Termination for Breach</u>. This Agreement may be terminated by one party, upon no less than thirty (30) days notice, because of the other party's failure to perform an

obligation hereunder. Said notice shall be delivered by certified mail, return receipt requested, or in person to the other party's contract manager with proof of delivery. Waiver of breach of any provisions of this Agreement shall not be deemed to be a waiver of any other breach and shall not be construed to be a modification of the terms of this Agreement.

9. <u>MISCELLANEOUS</u>. The parties further agree:

- a. <u>Availability of Funds</u>. If this Agreement, any renewal hereof, or any term, performance or payment hereunder, extends beyond the fiscal year beginning July 1, 2010, it is agreed that the performance and payment under this Agreement are contingent upon an annual appropriation by the Legislature, in accordance with section 287.0582, Florida Statutes.
- b. <u>Contract Managers</u>. The name and address of the contract managers for the parties under this Agreement are as follows:

For the State:

For the County:

Michael Napier

Name

Michele Saunders

Name

Administrator

Seminole County Health Department

Title

<u>Director</u>

Seminole Cty Community Services

Title

400 West Airport Boulevard

Sanford, FL 32773

Address

534 West Lake Mary Boulevard

Sanford, FL 32773

Address

(407) 665-3200

Telephone

(407) 665-2302

Telephone

If different contract managers are designated after execution of this Agreement, the name, address and telephone number of the new representative shall be furnished in writing to the other parties and attached to originals of this Agreement.

c. <u>Captions</u>. The captions and headings contained in this Agreement are for the convenience of the parties only and do not in any way modify, amplify, or give additional notice of the provisions hereof.

In WITNESS THEREOF, the parties hereto have caused this _24__ page agreement to be executed by their undersigned officials as duly authorized effective the 1st day of October, 2009.

BOARD OF COUNTY COMMISSIONERS FOR SEMINOLE COUNTY

STATE OF FLORIDA DEPARTMENT OF HEALTH

SIGNED BY:	SIGNED BY:
NAME: Bob Dallari	NAME: Ana M. Viamonte Ros, M.D., M.P.H.
TITLE: Chairman, Board of County Commissioners	TITLE: State Surgeon General
DATE:	DATE:
ATTESTED TO:	2/1
SIGNED BY:	SIGNED BY: Worked This
NAME: Maryanne Morse	NAME: Michael Napier
TITLE: Clerk of the Circuit Court	TITLE: CHD Director/Administrator
DATE:	DATE: 8/31/09

ATTACHMENT I

SEMINOLE COUNTY HEALTH DEPARTMENT

PROGRAM SPECIFIC REPORTING REQUIREMENTS AND PROGRAMS REQUIRING COMPLIANCE WITH THE PROVISIONS OF SPECIFIC MANUALS

Some health services must comply with specific program and reporting requirements in addition to the Personal Health Coding Pamphlet (DHP 50-20), Environmental Health Coding Pamphlet (DHP 50-21) and FLAIR requirements because of federal or state law, regulation or rule. If a county health department is funded to provide one of these services, it must comply with the special reporting requirements for that service. The services and the reporting requirements are listed below:

	<u>Service</u>	<u>Requirement</u>
1.	Sexually Transmitted Disease Program	Requirements as specified in FAC 64D-3, F.S. 381 and F.S. 384 and the CHD Guidebook.
2.	Dental Health	Monthly reporting on DH Form 1008*.
3.	Special Supplemental Nutrition Program for Women, Infants and Children.	Service documentation and monthly financial reports as specified in DHM 150-24* and all federal, state and county requirements detailed in program manuals and published procedures.
4.	Healthy Start/ Improved Pregnancy Outcome	Requirements as specified in the 2007 Healthy Start Standards and Guidelines and as specified by the Healthy Start Coalitions in contract with each county health department.
5.	Family Planning	Periodic financial and programmatic reports as specified by the program office and in the CHD Guidebook, Internal Operating Policy FAMPLAN 14*
6.	Immunization	Periodic reports as specified by the department regarding the surveillance/investigation of reportable vaccine preventable diseases, vaccine usage accountability, the assessment of various immunization levels and forms reporting adverse events following immunization and Immunization Module quarterly quality audits and duplicate data reports.
7.	Chronic Disease Program	Requirements as specified in the Healthy Communities, Healthy People Guidebook.
8.	Environmental Health	Requirements as specified in Environmental Health Programs Manual 150-4* and DHP 50-21*
9.	HIV/AIDS Program	Requirements as specified in F.S. 384.25 and 64D-3.016 and 3.017 F.A.C. and the CHD Guidebook. Case reporting should be on Adult HIV/AIDS Confidential Case Report CDC Form 50.42A and Pediatric HIV/AIDS Confidential Case Report CDC Form 50.42B. Sociodemographic data on persons tested for HIV in CHD clinics

should be reported on Lab Request DH Form 1628

ATTACHMENT I (Continued)

or Post-Test Counseling DH Form 1628C. These reports are to be sent to the Headquarters HIV/AIDS office within 5 days of the initial post-test counseling appointment or within 90 days of the missed post-test counseling appointment.

10. School Health Services

Requirements as specified in the Florida School Health Administrative Guidelines (April 2007).

^{*}or the subsequent replacement if adopted during the contract period.

ATTACHMENT II

SEMINOLE COUNTY HEALTH DEPARTMENT

PART I. PLANNED USE OF COUNTY HEALTH DEPARTMENT TRUST FUND BALANCES

	Estimated State Share of CHD Trust Fund Balance as of 09/30/09	Estimated County Share of CHD Trust Fund Balance as of 09/30/09	Total
1. CHD Trust Fund Ending Balance 09/30/09	1,904,847	990,165	2,895,012
 Drawdown for Contract Year October 1, 2009 to September 30, 2010 	325,640	169,272	494,912
 Special Capital Project use for Contract Year October 1, 2009 to September 30, 2010 	557,135	289,607	846,742
4. Balance Reserved for Contingency Fund October 1, 2009 to September 30, 2010	1,022,072	531,286	1,553,358

Note: The total of items 2, 3 and 4 must equal the ending balance in item 1.

Special Capital Projects are new construction or renovation projects and new furniture or equipment associated with these projects, and mobile health vans.

Pursuant to 154.02, F.S., At a minimum, the trust fund shall consist of: an operating reserve, consisting of 8.5 percent of the annual operating budget, maintained to ensure adequate cash flow from nonstate revenue sources.

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015040	AT O/OONED TO OFFISA MOVEMENT THE THEFT DOTTERS OF THE					_
015040	ALO/CONTR. TO CHOS-MCH HEALTH - FIELD STAFF COST	0 .	0	0	0	0
015040	ALG/CONTRIBUTION TO CHDS-PRIMARY CARE ALG/IPO HEALTHY START/IPO	9,684	0	9,684	0	9,684
015040		450,921	0	450,921	0	450,921
015040	ALO/SCHOOL HEALTH/SUPPLEMENTAL	0	0	0	0	0
015040	CLOSING THE GAP PROGRAM	0	0	0	0	0
015040	COMMUNITY SMILES - DADE	0	0	0	0	0
015040	COUNTY SPECIFIC DENTAL PROJECTS - ESCAMBIA	0	0	0	0	0
015040	DUVAL TEEN PREGNANCY PREVENTION	0	0	0	0	0
	FL CLPPP SCREENING & CASE MANAGEMENT	0	Ű	0	0	0
015040 015040	HEALTHY BEACHES MONITORING	0	0	0	0	0
	HEALTHY START MED-WAIVER - CLIENT SERVICES	185,616	. 0	185,616	0	185,616
015040	MANATES COUNTY RURAL HEALTH SERVICES	0	0	0	0	0
015040	MINORITY OUTREACH-PENALVER CLINIC DADE	0	. 0	0	0	0
015040	SPECIAL NEEDS SHELTER PROGRAM	۵	0	0	Ð	0
015040	STD GENERAL REVENUE	Û	0	0	0	0
015040	ALO/CONTR TO CHOS-DENTAL PROGRAM	0	0	0	0	0
015040	ALG/CONTR. TO CHDS-IMMUNIZATION OUTREACH TEAMS	26,340	0	26,340	0	26,340
015040	ALG/CONTR TO CHOS-AIDS PATIENT CARE	100,000	0	100,000	0	100,000
015040	ALG/CONTR TO CHOS-AIDS PREV & SURV & FIELD STAFF	47,855	0	47,855	0	47,855
015040	ALG/CONTR. TO CHOS-INDOOR AIR ASSIST PROG	0	0	0	0	Ô
015040	ALO/CONTR TO CHDS-MIGRANT LABOR CAMP SANITATION	0	0	0	Û	0
015040	ALOFAMILY PLANNING	82,122	0	82,122	0	82,122
015040	ALG/CONTR. TO CHDS-SOVEREIGN IMMUNITY	0	Ů	0	0	0
015040	VARICEULA IMMUNIZATION REQUIREMENT	14,014	0	14,014	0	14,014
015040	STATEWIDE DENTISTRY NETWORK- ESCAMBIA	0	0	0	0	0
015040	PRIMARY CARE SPECIAL DENTAL PROJECTS	0	0	0	0	0
015040	METRO ORLANDO URBAN LEAGUE TEENAGE PREG PREV	Ô	0	0	0	0
015040	LA LIGA CONTRA EL CANCER	0	0	0	0	0
015040	HEALTHY START MED WAIVER-SOBRA	62,546	0	62,546	0	62,546
015040	FL HEPATITIS & LIVER FAILURE PREVENTIONCONTROL	77,420	0	77,420	0	77,420
015040	ENHANCED DENTAL SERVICES	0	0	0	0	0
015040	DENTAL SPECIAL INITIATIVE PROJECTS	19,802	0	19,802	0	19,802
015040	COMMUNITY TE PROGRAM	67,744	0	67,744	0	67,744
015040	COMMUNITY ENVIRONMENTAL HEALTH ADVISORY BOARD	0	0	0	0	0
015040	CATE - ESCAMBIA	0	0	0	0	0
015040	ALG/PRIMARY CARE	118,216	0	118,216	0	118,216
015040	ALG/CESSPOOL IDENTIFICATION AND ELIMINATION	0	0	0	Ð	0
015050	ALQ/CONTR TO CHDS	2,682,566	0	2,682,566	0	2,682,566
GENERAL	REVENUE TOTAL	3,944,846	0	3,944,846	Û	3,944,846
2. NON G	ENERAL REVENUE - STATE					
015010	IMMUNIZATION SPECIAL PROJECT	13,134	ð	13,134	0	13,134
015010	PUBLIC SWIMMING POOL PROGRAM	0	. 0	0	0	0
015010	ROBERT WOOD JOHNSON LEARNING COLLABORATIVE	1,000	0	1,000	. 0	1,000
015010	ALG/CONTR TO CHOS-REBASING TOBACCO TF	81,945	0	1,000 81,945	0	81,945
015010	ALG/CONTR. TO CHOS-BIOMEDICAL WASTE/DEP ADM TF	9.094	0	9,094	0	9,094
015010	ALG/CONTR. TO CHDS-SAFE DRINKING WATER PRODEP ADM	0.004	0	9,094	0	0
015010	BASIC SCHOOL HEALTH-TOBACCO TF	273,925	0	0 273,925	0	273,925
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2. NON G	ENERAL REVENUE - STATE					
015010	CHD PROGRAM SUPPORT	0	0	Ò	O	0
015010	ENVIRONMENTAL HEALTH PACE PROJECTS	20,000	0	20,000	0	20,000
015010	BLANK	0	Ô	Ó	0	0
015010	FULL SERVICE SCHOOLS - TOBACCO TF	186,934	0	186,934	9	186,934
015020	ALG/CONTR. TO CHDS-BIOMEDICAL WASTEDEP ADM TF	0	0	Û	Ú	0
015020	ALG/CONTR. TO CHDS-SAFE DRINKING WATER PRG/DEP ADM	0	0	0	0	0
015020	FOOD AND WATERBORNE DISEASE PROGRAM ADM TFDACS	0	0	0	0	0
NON GEN	ERAL REVENUE TOTAL	586,032	0	586,032	0	586,032
3. FEDER	AL FUNDS - State					
007000	CHILDHOOD LEAD POISONING PREVENTION	0	0	Û	Q	0
007000	DIABETES PREVENTION & CONTROL PROGRAM	0	Ô	ů ů	0	0
007000	FAMILY PLANNING EXPANSION FUNDS2008-09	100,000	0	•	0	000,001
007000	FOTF/BREAST & CERVICAL CANCER-ADMIN/CASE MAN	56,250	Ð	100,000	0	56,250
007000	FOTF/FAMILY PLANNING TITLE X	116,009	0	56,250 116.009	v û	116,009
007000	FGTF/WIC ADMINISTRATION	1,591,149	0	•	0	1,591,149
007000	HEALTHY PROPLE HEALTHY COMMUNITIES	19,155	0	1,591,149 19,155	6	19,155
007000	IMMUNIZATION FIELD STAFF EXPENSE	19,135	0	19,122	0	0
007000	IMMINIZATION WIGLINKAGES	ō	9	A A	0	0
007000	HINI MASS VACCINATION IMPLEMENTATION	160,006	6	160,006	Ð	160,006
	PHP - CITIES READINESS INITIATIVE	39,816	0	-	0	39,816
007 000 007 000	RAPE PREVENTION & EDUCATION GRANT	0	0	39,816 0	0	0
	RYAN WHITE	0	0	0	0	0
007000	BIOTERRORISM PLANNING & READINESS	13.474	0	*	0	13,474
007000	AFRICAN AMERICAN TESTING INITIATIVE(AATI)	0	0	13,474 0	Û	0
007000		0	0	Đ	Û	Ď.
007000	AIDS SURVEILLANCE RYAN WHITE-AIDS DRUG ASSIST PROG-ADMIN	35,000	0	35,000	0	35,000
007000	STD FEDERAL GRANT - CSPS	93,668	0	93,668	ò	93,668
007000	STD PROGRAM - PHYSICIANS TRAINING CENTER	93,000	0	ya,ooo	Ü	0
007000	STD PROGRAM-INFERTILITY PREVENTION PROJECT(IPP)	٥	0	0	0	0
007000	TITLE X HTV/AIDS PROJECT	0	0	0	0	0
007000		29,529	0		0	29,529
007000	WIC BREASTFEEDING PEER COUNSELING	53.984	0	29,529	0	53,984
007000	TUBERCULOSIS CONTROL - FEDERAL GRANT	0	0	53,984	0	0
007000	SYPHILIS ELIMINATION	0	0	0	0	0
007000	STD PROGRAM INFERTILITY PREVENTION PROJECT(IPP)	0	0	0	0	o
007000	STD PROGRAM - PHYSICIAN TRAINING CENTER	0	. 0	0 .	0	0
007000	RYAN WHITE-CONSORTIA BIOTERRORISM HOSPITAL PREPAREDNESS	0	0	0	0	0
007000	AIDS PREVENTION	0	0	0	0	0
007000	BIOTERRORISM SURVEILLANCE & EPIDEMIOLOGY	41,039	0	41,039	0	41,039
007000	COASTAL BEACH MONITORING PROGRAM	0	0	0	0	o
007000	FGTF/IMMUNIZATION ACTION PLAN	39,642	0	39.642	Û	39,642
	FGTF/FAMILY PLANNING TITLE X SPECIAL INITIATIVES	0	0	39,042	0	0
007000		0	0	0	Đ	9
007000	FOTF/AIDS MORBIDITY ENVIRONMENTAL & HEALTH EFFECT TRACKING	0	0	0	0	0
007000 007000	RYAN WHITE - EMERGING COMMUNITIES	0	0	0	ů	0
007000	RISK COMMUNICATIONS	ů ·	0	. 0	. 0	0
007000	PUBLIC HEALTH PREPAREDNESS BASE	295,439	0	295,439	. 0	295,439
901V00	TODDIC TEAL OUT AMEDICES DASE	_,,,,,		610,401		•

ATTACHIVENTIA

PARINORE COUNTY REAL TRADESARIATION

Part IL courses at Containations to county breat Department

Doubles 1: 2011 produced at 2011

		fg Seitember id:				100406
		State Hos Grandund		To ichi		
		3 111 1110 1110 1110 1110 1110 1110 111		isastiuse exab	a Piner	Total
3. FEDE	nanamanananananananan madamananananananananananananananananana	Kemmusiye de bija memori				nii Pynin ilinin Timurika.
007000	MCH BOTF-HEALTHY START IPO	85,200	0	85,200	0	85,200
007000	IMMUNIZATION-WIC LINKAGES	0	0	0 ,200	0	0
007000	IMMUNIZATION SUPPLEMENTAL	0	0	0	٥	0
007000	HIV INCIDENCE SURVEILLANCE	0	0	0	0	0
007000	HBALTH PROGRAM FOR REFUGEES	11,267	ý Ú	11,267	Û	11,267
015009	MEDIPASS WAIVER-HLTHY STRT CLIENT SERVICES	157,249	û	157,249	ů.	157,249
015009	MEDIPASS WAIVER-SOBRA	95,000	0	95.000	0	95,000
015075	TRANSFER OF FEDERAL GRANT FROM OTHER AGENCY	0	0	0	Ů	0
015075	Summer Feeding Program	0	0	0	ŏ	0
FEDERA	L FUNDS TOTAL	3,032,876	0	3.032,876	Ō	3,032,\$76
4. FEES	ASSESSED BY STATE OR FEDERAL RULES - STATE			,,,,, ,,,,		
001020	TANNING FACILITIES	12,285	0	12,285	0	12,285
001020	BODY PIERCING	1,500	0	12,283	0	1,500
001020	MIGRANT HOUSING PERMIT	0.500	0	1,500	Ö	0
001020	MOBILE HOME AND PARKS	6.810	0.		0	6,810
001020	FOOD HYGIENS PERMIT	60,320	o. <u>↑</u>	6,810	0	60,320
001020	BIOHAZARD WASTE PERMIT	29,900	. 0	60,320	0	29,900
001020	PRIVATE WATER CONSTR PERMIT	100	0	29,90 0	0	100
001020	PUBLIC WATER ANNUAL OPER PERMIT	3.950	0	100	0	3,950
001020	PUBLIC WATER ANNUAL OPER PERMIT PUBLIC WATER CONSTR PERMIT	3,530	0	3,950	0	0 دو, د 0
001020	NON-SDWA SYSTEM PERMIT	0	0	0	0	Ó
001020	SAFE DRINKING WATER	0	0	0	0	0
001020	SWIMMING POOLS	150,680	0	0	0	150,680
				150,680	Û	190,000
001092	OSDS PERMIT FEE	190,000 0	0	190,000	· ·	000,000
001092	i & M ZONED OPERATING PERMIT	_	0	0	0	500
001092	Food Hygiene State	500 0	0	500	0	0
00109Z	SEPTIC TANK SITE EVALUATION	·-	0	0	0	Ó
001092	NON SDWA LAB SAMPLE	0	0	0	0	0
001092	OSDS VARIANCE FEE	. 0	0	0	0	0
001092	ENVIRONMENTAL HEALTH FEES	0	0	0	0	0
001092	OSDS REPAIR PERMIT	0	0	0	0	0
001170	LAB FEE CHEMICAL ANALYSIS	0	0	0	0	0
001170	WATER ANALYSIS-POTABLE	0	0	0	0	0
001170	NONPOTABLE WATER ANALYSIS	0	0	0	0	27,350
010304	MQA INSPECTION FEE (SUPER ACT SERVICES/ SUMMER FEE SESSED BY STATE OR FEDERAL RULES TOTAL	483,395	0	27,350	0	483,395
	R CASH CONTRIBUTIONS - STATE	+02,273	V	483,395	v	760,000
J. UIII						
010304	STATIONARY POLLUTANT STORAGE TANKS	. 0	0	0	0	Û
090001	DRAW DOWN FROM PUBLIC HEALTH UNIT	325,640	0	325,640	0	325,640
OTHER C	ASH CONTRIBUTIONS TOTAL	325,640	0	325,640	- 0	325,640
6. MEDIO	CAID - STATE/COUNTY					
001056	MEDICAID PHARMACY	0	0	0	0	0
001076	MEDICAID TB	3,236	6,764	10,000	0	10,000
001078	MEDICAID ADMINISTRATION OF VACCINE	8,050	8,050	16,100	0	16,100

TTACHUTY II.

SEMINGRECOUSTY HERE BODE PARTICLE OF PRINTERS FARTH Sources of Compributions to Complete the Department Complete Total Season area & Course

	ucans The state of the state of					
		I Figure Service		Trus Fand	12742	
6. MEDI	CAID - STATE/COUNTY					
001079	MEDICAID CASE MANAGEMENT	. 0	. 0	0	. 0	0
001081	MEDICAID CHILD HEALTH CHECK UP	46,922	98,078	145,000	9	145,000
001082	MEDICAID DENTAL	550,120	1,149,830	1,700,000	0	1,700,000
001083	MEDICAID FAMILY PLANNING	10,500	94,500	105,000	0	105,000
001087	MEDICAID STD	11,326	23,674	35,000	0	35,000
001089	MEDICAID AID\$	21,034	43,966	65,000	0	65,000
001147	MEDICAID HMO RATE	0	0	0	0	0
001191	MEDICAID MATERNITY	474,074	990,926	1,465,000	0	1,465,000
001192	MEDICAID COMPREHENSIVE CHILD	26,839	36,141	83,000	0	83,000
001193	MEDICAID COMPREHENSIVE ADUILT	2,427	5,073	7,500	0	7,500
001194	MEDICAID LABORATORY	485	1,015	1,500	0	1,500
001208	MEDIPASS \$3.00 ADM. FEE	3,000	5,000	6,000	0	6,000
001059	Medicaid Low Income Pool	.0	0	٥	0	9
001051	Emergency Medicaid	0	O.	0	ò	0
001058	Medicaid - Behavioral Health	0	0	0	0	0
001071	Medicaid - Orthopedic	Ó	0	0	0	0
001072	Medicaid - Dermatology	0	0	0	0	0
001075	Medicaid - School Health Centified Match	1,133	2,367	3,500	0	3,500
001069	Medicaid - Refugee Health	0	C	. 0	0	0
001055	Medicaid - Hospital	0	0	0	0	0
MEDICAL	D TOTAL	1,159,166	2,483,434	3,642,600	()	3,642,600
	CABLE REVENUE - STATE		-, ,	3,042,000		, ,
		٠				Δ
018000	REFUNDS .	0	Ò	Ō	0	0
037000	PRIOR YEAR WARRANT	0	0	0	0	0
038000	12 MONTH OLD WARRANT	0	0	0	0	0
ALLOCAL	BLE REVENUE TOTAL	. 0	0	0	0	0
8. OTHER	R STATE CONTRIBUTIONS NOT IN CHD TRUST	FUND - STATE				
	PHARMACY SERVICES	۵	Ó	0	70,808	70,808
	LABORATORY SERVICES	0	0	Ð	192.766	192,766
	TB SERVICES	0	0	0 -	0	0
	IMMUNIZATION SERVICES	0	0	0	902,624	902,624
	STD SERVICES	0	0	0	0	0
	CONSTRUCTION/RENOVATION	0	0	0	0	0
	WIC FOOD	0	0	0	6,646,945	6,646,945
	ADAP	0	0	0	736,791	736,791
	DENTAL SERVICES	0	0	D.	0	0
	OTHER (SPECIFY)	0	0	0	0	0
	OTHER (SPECIFY)	0	0	0	0	0
OTHER ST	TATE CONTRIBUTIONS TOTAL	0	0	0	8,549,934	8,549,934
	T COUNTY CONTRIBUTIONS - COUNTY			ŭ		
008030	BCC Contribution from Health Care Tax	0	0	0	0	٥
008034	BCC Contribution from General Fund	0	807,970	80 7, 970	Đ	807,970
		•	·	₫U/,7/V	_	
DIRECT (COUNTY CONTRIBUTION TOTAL	0	807,970	807,970	0	807,970

SEMINGLE GOLDALS HE ALTHIOMPARTOLISH PRINTED SOURCES AND RESOURCE OF COURTS HOUSE Department Cooker 12 2004 & Securities in this is a security

		e Light Light	County CLUD	lorgi (FB) Frances		
			2 e 150 (2 e 25 e 2		Control on	i i i i i i i i i i i i i i i i i i i
10. FEES	AUTHORIZED BY COUNTY ORDINANCE OR RESOLUTION - C	COUNTY	F		4,24,14,24,14,14,14,14,14,14,14,14,14,14,14,14,14	er in annual constant (14). 22 can
001060	CHD SUPPORT POSITION	0	0	0	٥	0
001077	RABIES VACCINE	0	0	٥	0	0
001077	IMMUNIZATIONS	0	360,000	360,000	0	360,000
001077	PERSONAL HEALTH FEES	0	297,000	297,000	0	297,000
001077	AIDS CO-PAYS	0	0	4,77,000	0	0
001094	ADULT ENTER PERMIT FEES	0	0	0	0	0
001094	LOCAL ORDINANCE FEES	Ð	57,000	57,000	0	57,000
001114	NEW BIRTH CERTIFICATES	Q.	81,000	81,000	0	81,000
001115	Vital Statistics - Death Certificate	0	165,000	165,000	0	165,000
001117	VITAL STATS-ADM. FEE 50 CENTS	0	4,200	4,200	0	4,200
001073	Co-Pay for the AIDS Care Program	0	0	0	0	0
001025	Client Revenue from GRC	0.	0	0	0	0
FEES AUT	CHORIZED BY COUNTY TOTAL	0	964,200	964,200	0	964,200
11. OTHE	R CASH AND LOCAL CONTRIBUTIONS - COUNTY					
001009	RETURNED CHECK ITEM	0	û	0	Ô	0
001029	THIRD PARTY REIMBURSEMENT	0	211,400	211,400	0	211,400
001029	HEALTH MAINTENANCE ORGAN (HMO)	0	0	211,400	0	0
001054	MEDICARE PART D	0	0	Ô	0	0
001077	RYAN WHITE TITLE II	0	0	0	0	0
001090	MEDICARE PART 8	0	39 17\$	39.175	0	39,175
001190	Health Maintenance Organization	0	0	0	0	0
005040	INTEREST EARNED	0	0	0	0	0
005041	INTEREST EARNED-STATE INVESTMENT ACCOUNT	0	23,032	23,032	O	23,032
007010	U.S. GRANTS DIRECT	0	Ó	0	0	0
008010	DRAWDOWN	0	0	0	0	0
008020	Contribution from Health Care Tax not thru BCC	0	0	0	0	0
008050	School Board Contribution	Ó	0	ò	0	0
008060	Special Project Contribution	0	. 0	0	0	0
010300	SALE OF GOODS AND SERVICES TO STATE AGENCIES	0	0	0	Ō	0
010301	EXP WITNESS FEE CONSULTNT CHARGES	Û	0	0	0	0
010405	SALE OF PHARMACEUTICALS	0	0	0	0	0
010409	SALE OF GOODS OUTSIDE STATE GOVERNMENT	G G	0	0	0	0
011000	GRANT DIRECT-NOVA UNIVERSITY CHD TRAINING	0	0	0	0	0
011000	GRANT AND DONATIONS	0	160,200	160,200	0	160,200
011001	HEALTHY START COALITION CONTRIBUTIONS	0	0	0	0	0
011007	CASH DONATIONS PRIVATE	0	50,250	50,250	0	50,250
012020	FINES AND FORFEITURES	0	0	0	0	0
012021	RETURN CHECK CHARGE	0	50	5Q	0	50
028020	INSURANCE RECOVERIES-OTHER	0	٥	0	0	0
090002	DRAW DOWN FROM PUBLIC HEALTH UNIT	0	159,272	169,272	Đ	169,272
011000	GRANT DIRECT-COUNTY HEALTH DEPARTMENT DIRECT SERVICES	Ò	0	0	0	0
011000	DIRECT-ARROW	٥	0	0	0	0
011000	GRANT-DIRECT	0	0	0	0	0
011000	GRANT-DIRECT	0	0	0	0	0
011000	GRANT-DIRECT	0	0	0	0	0
011000	GRANT-DIRECT	0	0	0	0 .	٥
011000	GRANT-DIRECT	0	0	0	0	0

TOTALINE TO

SEMINOLE COUNTY MEASURES REPARTS (ENT.). PROFIL SOBRESSI COMMUNICIONS DE COUNTY BEAST. DE L'AUGUSTÈRE

Baraker 1: 3000 to Stationer 18: 2010

		ere ere Tantifens	ionii Se	Trackentor Trackenses		
					Aptringues.	
u. Oin	ER CASH AND LOCAL CONTRIBUTIONS - COUNTY					
011000	GRANT-DIRECT	0	0	0	. 0	0
011000	GRANT-DIRECT	0	ù	0	٥	0
011000	GRANT DIRECT-ARROW	0	0	0	0	0
011000	GRANT DIRECT-QUANTUM DENTAL	0	0	. 0	0	0
011000	GRANT DIRECT-HEALTH CARE DISTRICT PAHOKES	0	0	0	0	0
010402	Recycled Material Sales	0	0	0	0	0
010303	FDLB Fingerprinting	0	. 0	0	Ô	0
007050	ARRA Pederal Grants Direct to CHD	0	0	0	0	0
001010	Recovery of Bad Checks	, 0	0	0	0	0
008065	FCO Contribution	٥	ó	0	0	0
011006	Restricted Cash Donation	٥	0	0	ō	0
028000	Insurance Recoveries	0	0	0	0	0
001033	CMS Management Fcc - PMPMPC	0	0	0	0	. 0
010400	Sale of Goods Outside State Government	Q	0	0	0	0
010500	Refugee Health	0	0	0	0	0
OTHER C	ASH AND LOCAL CONTRIBUTIONS TOTAL	0	653,379	653,379	0	653,379
12. ALLO	CABLE REVENUE - COUNTY					
018000	REFUNDS	0	0	0	0	0
037000	PRIOR YEAR WARRANT	0	0	Ó	0	0
038000	12 MONTH OLD WARRANT	0	0	0	0	0
COUNTY	ALLOCABLE REVENUE TOTAL	G	0	. 0	Ô	. 0
13. BUILI	DINGS - COUNTY					
	ANNUAL RENTAL EQUIVALENT VALUE	0	0	0	904,014	904,014
	GROUNDS MAINTENANCE	0	0	Đ	52,799	52,799
	OTHER (SPECIFY)	. 0	0	0	0	0
	INSURANCE	. 0	0	Ō	0	′ 0
	UTILITIES:	0	0	0	154,746	154,746
	OTHER (SPECIFY)	0	٥	0	0	0
	BUILDING MAINTENANCE	0	0	0	51,635	51,635
BUILDING	SS TOTAL	0	0	0	1,163,194	1,163,194
14. OTHE	R COUNTY CONTRIBUTIONS NOT IN CHD TRUST FU	ND - COUNTY				
	EQUIPMENT/VEHICLE PURCHASES	0	0	0	0	0
	VEHICLE INSURANCE	0	0	0	0	0
	VEHICLE MAINTENANCE	٥	0	0	0	0
	OTHER COUNTY CONTRIBUTION (SPECIFY)	0	0	0	. 0	Û
	OTHER COUNTY CONTRIBUTION (SPECIFY)	. 0	0	0	0	0
OTHER CO	DUNTY CONTRIBUTIONS TOTAL	0	0	0	0	0
GRAND TO	TAL CHD PROGRAM	9,531,955	4,908,983	14,440,938	9,713,128	24,154,066

Remark Cittae September 18, 2015

	1718	Carres		ia.						Great.
	(\$10)				To pulse six				0.000	
A. COMMUNICABLE DISEASE CONTRO)L:		•							
VITAL STATISTICS(180)	3,48	12,355	33,730	39,542	38,497	46,026	34,533	. 0	158,598	158,598
IMMUNIZATION(101)	13.61	12,693	32,532	368,106		356,206	237,245		540,282	1,239,027
STD (102)	13.98	2,884	17,152	249,590		247,895	206,366		646,181	910,952
A.I.D.S. (103)	11,42	312	3,491	182,369	171.706	242,200	141,800		544,322	738,075
TB CONTROL SERVICES (104)	6.60	2,094	8,572	123,914	97,314	150,745	100,537		211,753	472,510
COMM. DISEASE SURV. (106)	0.17	. 0	9	3,129	6,059	2,709	2,436	•	2,674	8,915
HEPATITIS PREVENTION (109)	2.53	3,770	6,848	44,723	37,928	46,840	38,209		50,310	167,700
PUBLIC HEALTH PREP AND RESP(116)	5.66	0	3,955	231,154	218,049	216,959	244,493		. 0	910,655
COMMUNICABLE DISEASE SUBTOTAL	57.45	34,108	106,280	1,242,527	-	1,304,162	-	2,452,312	2,154,120	4,606,432
B. PRIMARY CARE:										
CHRONIC DISBASE SERVICES (210)	2,75	236	424	58,346	56,310	48,885	44,807	147,580	60,768	208,348
TOBACCO PREVENTION (212)	0.00	0	0	0	0	0	. 0	Ō	0	0
HOME HEALTH (215)	0.00	0	0	0	Ŋ	0	0	0	0	0
W.I.C. (221)	26,56	9,093	117,285	559,842	301,240	494,287	510,072	1,865,441	0	1,865,441
FAMILY PLANNING (223)	12.93	2,991	16,015	256,070	228,645	293,483	192,733	729,952	240,980	976,932
IMPROVED PREGNANCY OUTCOME (225)	20.51	1,526	18,296	385,932	425,220	445,939	327,471	509,195	1,075,369	1,584,562
HEALTHY START PRENATAL (227)	15.90	2,666	38,338	266,798	298,632	378,613	176.688	1,120,731	0	1,120,731
COMPREHENSIVE CHILD HEALTH (229)	7.42	1,565	4,818	131,336	109,017	135,583	122,978	399,240	99.674	498.914
HEALTHY START INFANT (231)	8.83	1,059	14,680	121,688	117,472	142,951	84,820	466,931	0	466,931
SCHOOL HEALTH (234)	7.36	٥	657,134	96,108	199,736	233,493	66,598	417,148	178,777	595,925
COMPREHENSIVE ADULT HEALTH (237)	7.75	1.994	3,161	141,831	114,466	140,530	111,076	337,986	169,917	507,903
DENTAL HEALTH (240)	15.18	6,4 66	38,495	291,296	230,531	305,279	235,714	376,429	686,391	1,062,820
Healthy Start Interconception Woman (232)	0.01	0	0	0	423	. 113	0	377	161	538
PRIMARY CARE SUBTOTAL	125,20	27,596	908,646	2,309,247	2.081.685	2,619,156	1,372,957	6,371,003	2,512,037	8,883,045
C. ENVIRONMENTAL HEALTH:										
Water and Onsite Sewage Programs										
COASTAL BEACH MONITORING (347)	0.00	0	0	0	0	0	0	0	0	٥
LIMITED USE PUBLIC WATER SYSTEMS(357)	0.55	42	128	7,018	10,488	10,987	11.570	28,945	12,018	40,063
PUBLIC WATER SYSTEM (358)	0.04	1	4	363	721	719	2,256	4,059	0	4,059
PRIVATE WATER SYSTEM (359)	0.03	3	16	118	871	582	23	1,594	0	1,594
INDIVIDUAL SEWAGE DISP. (361)	5.85	823	3,336	99,409	105,183	111,943	83,823	280,250	120,108	400,358
Group Total	6.47	869	3.484	106,908	117,263	124,231	97,672	313,948	132,126	446,074
Facility Programs	T = 0	20/	የግሳ	24.404	31 (7)	27 600	າດາເຄ	46 92 4	28,212	94,039
FOOD HYGIENE (348)	1.58	206	829	24,496	21,676	27,608	20,259	65,827 3,710	28,212	3,710
BODY ART (349)	0.02 1.66	. 10 352	11 545	1,213	672 51,842	779 26,565	1,046 22,585	3,710 89,696	38,441	128,137
GROUP CARE FACILITY(351) MIGRANT LABOR CAMP(352)	0.00	332 0		27,145 0	31,442	266 .	22,383	85,650	266	266
HOUSING, PUBLIC BLDG SAFETY, SANITATION		0	0	0	Ò	200 .	0	0	0	0
MOBILE HOME AND PARKS SERVICES (354)	0.14 0.14	21	54	2,370	1,361	3,527	1,388	6,052	2,594	8,646
SWIMMING POOLS/BATHING (360)	1,59	471	951	29,362	24,313	31,865	23,761	109,301	2,554	109,301
BIOMEDICAL WASTE SERVICES (364)	0.46	297	299	29,302 8,409	4,657	10,090	9,103	22,581	9,678	32,259
OPPOSITE WHEN THE STATE OF STATES (2017)	5.70	اوت	233	w, ry y	r, w / /	. 0,070	2,.00	mers VV 3	2,070	o myme o

SEMINGERGOON TEAL REPORT ACCOUNT

Part III. Prame.! Stating of lices, Seisken, 311.7 Capenifficaes By Fengrai Service areas Wattin Parti Landon separa Octobse 1. 3019 (a September 24, 2010)

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	.01.00	104	an in the		i i i i suc cin	*****		in in the second	. Cam	1000
C. ENVIRONMENTAL HEALTH:										
Facility Programs										
TANNING FACILITY SERVICES(369)	0.15	30		-,	3,943	2,435	<i>'</i> .	11,223		11,223
Group Total Groundwater Contamination	5.60	1,387	2,754	94,688	108,464	103,135	81,294	308,390	79,19	387,581
STORAGE TANK COMPLIANCE (355)	0.00	0	0	0	0	0	0	Ð	. (0
SUPER ACT SERVICE (356)	0.80	38	382	19,282	9,846	14,046	14,131	40,113	17,192	57,305
Group Total Community Hyglene	0.80	38	382	19,282	9,846	14,046	14,131	40,113	17,192	57.305
RADIOLOGICAL HEALTH(372)	0.03	Q	Đ	96	1,472	-17	۵	1,086	465	1,551
TOXIC SUBSTANCES (373)	0.00	0	0	64	-18	-1	0	31	14	45
OCCUPATIONAL HEALTH (344)	0.24	0	257	2,935	1,620	6,326	2,974	13,835	0	13,855
CONSUMER PRODUCT SAFETY (345)	0.00	0	0	0	Ü	0	Û	0	0	0
INJURY PREVENTION (346)	0.00	0	0	0	0	Ó	Ō	0	0	0
LEAD MONITORING SERVICES (350)	0.00	0	0	0	0	0	0	0	0	0
PUBLIC SEWAGE (362)	0.00	0	0	0	0	0	0	Q	0	0
SOLID WASTE DISPOSAL (363)	0.00	0	0	0	Ũ	0	0	0	0	0
SANITARY NUISANCE (365)	0.39	46	124	12,618	4,118	2,541	11,043	21,224	9,096	30,320
RABIES SURVEILLANCE/CONTROL SERVICE	S (36 6)00	0	Û	0	108	45	-15	0	138	138
ARBOVIRUS SURVEILLANCE (367)	0.10	0	0	2,671	1.952	3,186	2,4-14	7,177	3,076	10,253
RODENT/ARTHROPOD CONTROL (368)	0.08	Ð	()	1,225	762	1,117	912	2,811	1,205	4,016
WATER POLLUTION (370)	0.00	0	0	Ģ	0	0	0	0	0	0
AIR POLLUTION(371)	0.60	0	0	٥	9	323	0	0	323	323
Group Total	0.34	46	381	19,609	10,014	13,520	17,358	46,134	14,317	60,501
ENVIRONMENTAL HEALTH SUBTOTAL	13.71	2,340	7,001	240,487	245,587	254,932	210,455	708,635	242,826	951,461
D. SPECIAL CONTRACTS:										
SPECIAL CONTRACTS (599)	0.00	. 0	0	0	0	0	0	Ö	0	0
SPECIAL CONTRACTS SUBTOTAL	0.00	Ö	0	0	0	0	0	0	0	0
FOTAL CONTRACT	196.36	64,044 1	,021,927	3,792,261	3,381,396	,178,250	3,089,031 9	,531,955	4,908,983	14,440,938

ATTACHMENT III

SEMINOLE COUNTY HEALTH DEPARTMENT

CIVIL RIGHTS CERTIFICATE

The applicant provides this assurance in consideration of and for the purpose of obtaining federal grants, loans, contracts (except contracts of insurance or guaranty), property, discounts, or other federal financial assistance to programs or activities receiving or benefiting from federal financial assistance. The provider agrees to complete the Civil Rights Compliance Questionnaire, DH Forms 946 A and B (or the subsequent replacement if adopted during the contract period), if so requested by the department.

The applicant assures that it will comply with:

- 1. Title VI of the Civil Rights Act of 1964, as amended, 42 U.S.C., 2000 Et seq., which prohibits discrimination on the basis of race, color or national origin in programs and activities receiving or benefiting from federal financial assistance.
- 2. Section 504 of the Rehabilitation Act of 1973, as amended, 29 U.S.C. 794, which prohibits discrimination on the basis of handicap in programs and activities receiving or benefiting from federal financial assistance.
- 3. Title IX of the Education Amendments of 1972, as amended, 20 U.S.C. 1681 et seq., which prohibits discrimination on the basis of sex in education programs and activities receiving or benefiting from federal financial assistance.
- 4. The Age Discrimination Act of 1975, as amended, 42 U.S.C. 6101 et seq., which prohibits discrimination on the basis of age in programs or activities receiving or benefiting from federal financial assistance.
- 5. The Omnibus Budget Reconciliation Act of 1981, P.L. 97-35, which prohibits discrimination on the basis of sex and religion in programs and activities receiving or benefiting from federal financial assistance.
- 6. All regulations, guidelines and standards lawfully adopted under the above statutes. The applicant agrees that compliance with this assurance constitutes a condition of continued receipt of or benefit from federal financial assistance, and that it is binding upon the applicant, its successors, transferees, and assignees for the period during which such assistance is provided. The applicant further assures that all contracts, subcontractors, subgrantees or others with whom it arranges to provide services or benefits to participants or employees in connection with any of its programs and activities are not discriminating against those participants or employees in violation of the above statutes, regulations, guidelines, and standards. In the event of failure to comply, the applicant understands that the grantor may, at its discretion, seek a court order requiring compliance with the terms of this assurance or seek other appropriate judicial or administrative relief, to include assistance being terminated and further assistance being denied.

ATTACHMENT IV

SEMINOLE COUNTY HEALTH DEPARTMENT

FACILITIES UTILIZED BY THE COUNTY HEALTH DEPARTMENT

Facility Description

Location

Owned By

Main Facility Concrete Block Health Unit Design 50,269 square feet

400 West Airport Blvd. Sanford, FL 32773

Seminole County Gov't.

Satellite Facility Shopping Center Store Front 9,750 square feet

132 Sausalito Blvd. Casselberry, FL 32707 Leased by; Seminole County Gov't.

Owned by: The Greater

Construction Company 1105 Kensington Park Altamonte Springs, FL

ATTACHMENT V

SEMINOLE COUNTY HEALTH DEPARTMENT

SPECIAL PROJECTS SAVINGS PLAN

IDENTIFY THE AMOUNT OF CASH THAT IS ANTICIPATED TO BE SET ASIDE ANNUALLY FOR THE PROJECT.

CONTRACT YEAR	<u>STATE</u>		COUNTY		TOTAL	
2007-2008	\$		\$1	·	\$	
2008-2009	\$	71,003	\$	36,909	\$	107,912
2009-2010	\$	557,135	\$	289,607	\$	846,742
2010-2011	\$		\$		\$	
2011-2012	\$		\$		\$	_
PROJECT TOTAL	\$	628,139	\$	326,515	\$	954,654

SPECIAL PROJECT CONSTRUCTION/RENOVATION PLAN

- '					
PROJECT NAME:	Renovation Ph 2: Dental, Immunizations, Safety & Security upgrades etc.				
LOCATION/ ADDRESS:	400 W. Airport Blvd., Sanford, FL 32773				
PROJECT TYPE:	NEW BUILDING ROOFING ROOFING PLANNING STUDY NEW ADDITION OTHER				
SQUARE FOOTAGE:	8,000				
Seminole County Health Department at	terior renovation of approximately 8,000 square feet of office space within the existing 400 w. Airport Blvd, Sanford, FL 32773. This project will re-organize the existing attent friendly environment for each of the affected departments. In addition, required				
ESTIMATED PROJECT INFORMATION START DATE (initial expenditure of funds): COMPLETION DATE:	N: 1/1/2009 6/30/2010				
DESIGN FEES: CONSTRUCTION COSTS: FURNITURE/EQUIPMENT TOTAL PROJECT COST:	\$ 60,000 \$ 800,000 \$ 90,000 \$ 950,000				

Special Capital Projects are new construction or renovation projects and new furniture or equipment associated with these projects and mobile health vans.

107.50

COST PER SQ FOOT:

ATTACHMENT VI

SEMINOLE COUNTY HEALTH DEPARTMENT

PRIMARY CARE

"Primary Care" as conceptualized for the county health departments and for the use of categorical Primary Care funds (revenue object code 015040) is defined as:

"Health care services for the prevention or treatment of acute or chronic medical conditions or minor injuries of individuals which is provided in a clinic setting and may include family planning and maternity care."

Indicate below the county health department programs that will be supported at least in part with categorical Primary Care funds this contract year:

X_	Comprehensive Child Health (229/29)
<u>X</u>	Comprehensive Adult Health (237/37)
X_	Family Planning (223/23)
X	Maternal Health/IPO (225/25)
	Laboratory (242/42)
	Pharmacy (241/93)
X	Other Medical Treatment Program (please identify) Dental (240/24)

Describe the target population to be served with categorical Primary Care funds.

Does the health department intend to contract with other providers for the delivery of primary health care services using categorical (015040) Primary Care funds? If so, please identify the provider(s), describe the services to be delivered, and list the anticipated contractual amount by provider. In addition, contract providers are required to provide data on patients served and the services provided so that the patients may be registered and the service data entered into HMS.